OCT 17 2005

PTO/SB/80 (04-05)

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	ltioner(s) nam	ed below (If more than ten pate	ent practition	iers are to be	e named, then a cus	tomer number must be	used):
	Name		Registr Numi		<u> </u>	Name	Registration Number
Δr	Anthony Claiborne		39.63				110111007
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as attorney(s) or agent(s)	to represent the undersigned	before the U	nited States	Patent and Tradema	ark Office (USPTO) in o	connection with
any and all	patent applica this form in ac	tions assigned only to the undecordance with 37 CFR 3.73(b)	lersigned acc).	cording to the	e USPTO assignmer	nt records or assignmen	nt documents
		pondence address for the app		lified in the a	ittached statement u	nder 37 CFR 3.73(b) to):
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Firm	or vidual Name	Claiborne Patent I	Law Ser	vices			
Address	nuudi ivariie	849 136th Ave. N					
City		Bellevue		State WA		^{Zip} 98005	5
Country		U.S.A.					
Telephone	9	425-562-6290			Email		
		425-562-6290			1		
Assignee N	ame and Add	10900 N. E. 8th	h 900	nc.			
		Bellevue, WA 9	98004				
A copy of	this form, 1	together with a statement	t under 37	CFR 3.73(b) (Form PTO/SB	/96 or equivalent) is	required to be
the practi	itioners app	ion in which this form is onted in this form if the application in which this	appointed	practition	er is authorized t	.73(b) may be comp to act on behalf of t	oleted by one of the assignee,
and must			GNATURE o	f Assignee	of Record	n behalf of the assigne	е
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Signature	Kovin (Cosons				10/0	105
Name	Kevin C					Telephone 426-	914-933
Title	Preside	ent		- 1-2			F

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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OCT 1 7 2005 Under the Paper on Reduction Act of 1995, no persons are required to re	U.S. Patent and Trademark Off spond to a collection of Information unite	PTO/SB/82 (04-05) r use through 11/30/2005. OMB 0651-0035 rice, U.S. DEPARTMENT OF COMMERCE ess it displays a valid OMB control number.		
& PRINCIPALITY	Application Number	10/810,623		
REVOCATION OF POWER OF	Filing Date	03/29/2004		
ATTORNEY WITH	First Named Inventor	BLAIR, William		
NEW POWER OF ATTORNEY	Art Unit	3735		
AND	Examiner Name	LACYK, John P.		
CHANGE OF CORRESPONDENCE ADDRESS	Attorney Docket Number	05-1025-01		

I hereby revoke all previous powers of attorney given in the above-identified application.									
A Power of Attorney is submitted herewith.									
OR I hereby appoint	:								
Please change the correspondence address for the above-identified application to: The address associated with Customer Number:									
Firm or Individual Name	Anthony Claiborne			-					
Address Claiborne Patent Law Services 839 136th Ave. N.E.									
City	Bellevue	State WA		Zip	98005				
Country	u.s.a.								
Telephone	425-562-6290	Email 425-5	mail ₄₂₅₋₅₆₂₋₆₂₉₀						
I am the: Applicant/Inventor.									
	cord of the entire interest. See 37 C er 37 CFR 3.73(b) is enclosed. (Fon								
	SIGNATURE of Applicant	or Assignee of Re	cord						
Signature	- (
Name Kevin Cosens									
Date 10/18	2/06	Telephone	108-0	214	0880				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.									
*Total of 1forms are submitted.									

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/96 (09-04)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE work Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. MADE STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: RF Surgical Systems, Inc. Application No./Patent No.: 10/810,623 Filed/Issue Date: 03-29-2004 Entitled: Apparatus and method for detecting objects using tags and wideband detection device RF Surgical Systems, Inc. (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) states that it is: 1. the assignee of the entire right, title, and interest; or 2. an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is_____ in the patent application/patent identified above by virtue of either: A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel ______, Frame _____, or for which a copy thereof is attached. OR B. ✓ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below: 1. From: BLAIR, W.A. and PORT, J.L. To: Blair-Port LTD The document was recorded in the United States Patent and Trademark Office at Reel <u>016078</u>, Frame <u>0713</u>, or for which a copy thereof is attached. _____To: RF Recon, Inc. 2. From: Blair-Port LTD The document was recorded in the United States Patent and Trademark Office at Reel 016079 , Frame 0085 , or for which a copy thereof is attached. 3. From: RF Recon, Inc. To: RF Surgical Systems, Inc. The document was recorded in the United States Patent and Trademark Office at ____, Frame __ , or for which a copy thereof is attached. Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. Signature Kevin Cosens Printed or Typed Name Telephone Number President Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Fax Number:

Email Address: 9. Signature: (

U.S. DEPARTMENT OF COMMERCE Form PTO-1595 (Rey 2/05P CMB No. 0651-0027 (exp. 6/30/2005 United States Patent and Trademark Office RECORDATION FORM COVER SHEET OCT 1 7 2005 PATENTS ONLY To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below. 1. Name of conveying barty(ies) 2. Name and address of receiving party(ies) RF RECON, INC. Name: RF Surgical Systems, Inc. Internal Address: ___ Additional name(s) of conveying party(ies) attached? Yes 🗸 No 3. Nature of conveyance/Execution Date(s): Street Address: 10900 N.E. 8th Ave., Suite 900 Execution Date(s) March 25, 2005 Merger Assignment City: Bellevue ✓ Change of Name Security Agreement Joint Research Agreement State: Washington Government Interest Assignment Country: U.S.A. Zip:98004 Executive Order 9424, Confirmatory License Other Additional name(s) & address(es) attached? ☐ Yes ☑ No 4. Application or patent number(s): This document is being filed together with a new application. B. Patent No.(s) A. Patent Application No.(s) 60/458,222 6,026,818 10/810.623 PCT/US04/09584 Additional numbers attached? Yes No 6. Total number of applications and patents 5. Name and address to whom correspondence concerning document should be mailed: involved: 4 Name: Anthony Claiborne 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 160.00 Internal Address: Claibome Patent Law Services Authorized to be charged by credit card Authorized to be charged to deposit account ✓ Enclosed Street Address: 849 136th Ave. N.E. None required (government interest not affecting title) 8. Payment Information City: Bellevue a. Credit Card Last 4 Numbers Zip:98005 State: WA Expiration Date _____ Phone Number: 425-562-6290

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1450, Alexandria, V.A. 22313-1450

Signature

Anthony Claiborne, U.S.P.T.O. Reg. No. 39,636

Name of Person Signing

b. Deposit Account Number

Total number of pages including cover

sheet, attachments, and documents:

Date

Authorized User Name

STATE OF WASHINGTON



SECRETARY OF STATE

RF SURGICAL SYSTEMS, INC.

PR CORP SERVICES, INC. 10900 NE 4TH ST STE 1850 BELLEVUE WA 98004

AMENDMENT

I, Sam Reed, Secretary of State of the State of Washington and custodian of its seal, hereby certify that documents meeting Washington statutory requirements have been filed and processed with the Secretary of State on behalf of:

RF SURGICAL SYSTEMS, INC.

A Washington Profit Corporation

UBI: 602 451 119

Filing Date: March 25, 2005 Effective Date: March 25, 2005

Previous Name:

RF RECON, INC.



Given under my hand and the seal of the State of Washington at Olympia, the State Capital.

Sam Reed, Secretary of State

602 451 119

PETERSON RUSSELL KELL) 2005 591263 \$50,00 Cradit Card #608847

Tracking ID: 678461 Dec No: 591263-002



State of Washington Corporations Division Office of the Secretary of State

ARTICLES OF AMENDMENT OF RF RECON, INC.

FILED **SECRETARY OF STATE** SAM REED

March 25, 2005

STATE OF WASHINGTON

Pursuant to RCW 23B.10.060 of the Washington Business Corporation Act, the undersigned corporation hereby submits the following amendment to the corporation's Articles of Incorporation:

- The name of the corporation is RF Recon, Inc. 1.
- 2. The text of each amendment as adopted is as follows:

Article I of the Articles of Incorporation shall be amended in its entirety to read as follows:

ARTICLE I

NAME AND DURATION

The name of this corporation is RF Surgical Systems, Inc. The duration of the comoration's existence shall be perpetual.

- No amendment provides for an exchange, reclassification, or cancellation of issued 3. shares.
- The date of adoption of the amendment was March 35, 2005. 4.
- The amendment was adopted by the Board of Directors pursuant to RCW 5. 23B.10.020. Shareholder action was not required.
- These Articles will be effective upon filing. 6.

DATED this 25 day of March, 2005.

RF RECON, INC.

Kevin Cosens, President

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CERTIFICATE OF MAILING PURSUANT TO 37 CFR § 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450, on the following date of deposit: 13-October-2005

Date of signature: Oct 13,2005

Certifier